



Contra Costa County
Public Works
Department
APPLICATION AND PERMIT CENTER

PERMIT FEE \$ _____
RECEIPT No.: G- _____
APPLICATION DATE: _____
APPROVAL DATE: _____

PERMIT No.: _____
ROAD No.: _____
ROAD NAME: _____
AREA: _____
TBM: _____

ROAD CLOSURE PERMIT

PERMITTEE: _____ CONTACT PERSON: _____

ADDRESS: _____ TELEPHONE NUMBER: _____

CITY/STATE/ZIP: _____ FAX NUMBER: _____

PURPOSE: _____

LOCATION: _____

TIME LIMIT: DATE: _____ To: _____ INCLUDING SATURDAY(S) AND SUNDAY(S) ☐ YES ☐ NO

HOURS: _____ (AM/PM) To _____ (AM/PM)

TYPE OF INSTALLATION: ☐ TRAVERSE TO ROAD ☐ LONGITUDINAL TO ROAD

TYPE OF CLOSURE:

- ☐ COMPLETE CLOSURE TO ALL TRAFFIC 24-HOURS EACH DAY
- ☐ PARTIAL CLOSURE 24-HOURS EACH DAY.
- ☐ COMPLETE CLOSURE TO THROUGH TRAFFIC DURING WORKING HOURS.
- ☐ PARTIAL CLOSURE TO THROUGH TRAFFIC DURING WORKING HOURS.
- ☐ CLOSE ROAD TO THROUGH TRAFFIC, ALLOWING LOCAL AND EMERGENCY TRAFFIC AT ALL TIMES.
- ☐ EMERGENCY VEHICLES WILL BE ALLOWED PASSAGE AT ALL TIMES.

For Office Use

☐ Work Completed Inspector: _____
☐ Expired Date: _____
☐ Looks OK – No Inspection Requested

REQUIREMENTS:

- ☐ PROVIDE AN INSURANCE RIDER NAMING CONTRA COSTA COUNTY, ITS OFFICERS, EMPLOYEES AND AGENTS AS ADDITIONALLY INSURED IN THE AMOUNT OF ONE MILLION DOLLARS GENERAL COMMERCIAL AND AUTOMOBILE LIABILITY.
- ☐ SIGNED DETOUR VIA NEIGHBORING STREETS.
- ☐ SIGNED DETOUR AS PER PLAN FILED WITH THE PUBLIC WORKS DEPARTMENT.
- ☐ BOND: (☐ CASH ☐ SURETY) AMOUNT: \$ _____ RECEIPT No.: G- _____
- ☐ OTHER: _____

CONDITIONS:

1. The permittee shall notify any Fire Districts, the Highway Patrol, the Sheriff's Office, any School Districts, the Postal Service, and all utilities and newspapers affected by the closure, and shall comply with the requirements of the ordinance code of Contra Costa County, Title 10, and specifications relating thereto, and the policy on road closures.
2. All signing shall be in accordance with the most current edition of the California Manual on Uniform Traffic Control Devices.
3. The permittee shall notify all property owners affected by the road closure.

Items Attached or Referred to Herein and Made Part Hereof: _____

The Permittee agrees to save, indemnify and hold harmless the County of Contra Costa, its officers, employees and agents from all liabilities imposed by law by reason of injury to or death of any person(s) or damage to property, including without limitation liability for trespass, nuisance or inverse condemnation, which may arise out of the work covered by this permit and does agree to defend the County, its officers, employees and agents against any claim or action asserting such a liability. Accepting this permit or starting any work hereunder shall constitute acceptance and agreement to all the conditions and requirements of this permit and the ordinance and specifications authorizing issuance of such permit.

Signature of Permittee: _____

Date: _____

Print Name: _____

By: _____

Date: _____

Robert B. Hendry III, Permit Technician
For: Julia R. Bueren, Public Works Director, Contra Costa County

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